

SPECIAL OFFICIAL APPLICATION FOR MEMBERSHIP

INTERNATIONAL UNION, UNITED AUTOMOBILE, AEROSPACE & AGRICULTURAL IMPLEMENT WORKERS OF AMERICA (UAW)

TO LOCAL 6000

Name _____ (Print) _____ L. U. 6000

Address _____ City _____ State _____ Zip _____

Dept. Name & Code _____ Social Security No. _____

Worksite Address _____ Hire Date _____

I hereby designate, select and empower the International Union, United Automobile, Aerospace and Agricultural Implement Workers of America (UAW), its agents or representatives, to act for me as my exclusive representative for the purposes of collective bargaining in respect to rates of pay, wages, hours of employment or other conditions of employment, and to enter into contracts with my employer covering all such matters, including contracts requiring the continuance of my membership in said Union as a condition of my employment or continued employment, and contracts requiring the employer to deduct, collect, or assist in collecting from my wages or a regular supplemental unemployment benefit payable under its supplemental unemployment benefit plan any dues and fees payable to said Union; and I hereby revoke every selection or designation which in any manner may heretofore have been made by me, of any other representative for any of such purposes.

I further irrevocably designate, authorize and empower the said Union exclusively to appear and act for me and in my behalf before any board, court, committee or other tribunal in any matter affecting my status as an employee, or as a member of said Union, and exclusively to act as my agent to represent and bind me in the presentation, prosecution, adjustment and settlement of all grievances, complaints or disputes of any kind or character arising out of the employer-employee relationship as fully and to all intents and purposes as I might or could do if personally present.

I pledge my honor to faithfully observe the Constitution and laws of this Union and the Constitution of the United States (or the Dominion of Canada as the case may be); to comply with all the rules and regulations for the government thereof; not to divulge or make known any private proceedings of this Union; to faithfully perform all the duties assigned to me to the best of my ability and skill; to so conduct myself at all times as not to bring reproach upon my Union, and at all times to bear true and faithful allegiance to the International Union, United Automobile, Aerospace and Agricultural Implement Workers of America (UAW).

CONTRIBUTIONS OR GIFTS TO THE UAW ARE NOT DEDUCTIBLE AS CHARITABLE CONTRIBUTIONS FOR FEDERAL INCOME TAX PURPOSES.

PRINTED IN U.S.A. (Applicant's Signature) _____ (Date) _____

opeiu494 (Witness) _____

opeiu494

AUTHORIZATION FOR CHECK-OFF OF DUES

I hereby assign to UAW Local Union 6000 and the International Union, UAW (hereinafter Union), from any income earned or to be earned by me or a regular supplemental unemployment benefit payable under its supplemental unemployment benefit plan (or similar plan where applicable) as your employee (in my present or in any future employment by you), such sums as the Financial Officer of said Local Union 6000 may certify as due and owing from me as membership dues in the amount of .6 (six tenths) of one hour's pay per pay period. I authorize and direct you to deduct such amounts from my pay and to remit same to the Local Union at such times and in such manner as may be agreed upon between you and the Union at any time while this authorization is in effect.

This assignment, authorization and direction shall be irrevocable for the period of one (1) year from the date of delivery hereof to you, or until the termination of the collective agreement between the Employer and the Union which is in force at the time of delivery of this authorization, whichever occurs sooner; and I agree and direct that this assignment, authorization and direction shall be automatically renewed, and shall be irrevocable for successive periods of one (1) year each or for the period of each succeeding applicable collective agreement between the Employer and the Union, whichever shall be shorter, unless written notice is given by me to the Employer and the Union, not more than twenty (20) days and not less than ten (10) days prior to the expiration of each period of one (1) year, or of each applicable collective agreement between the Employer and the Union whichever occurs sooner.

I hereby revoke any prior authorization for check-off of dues that I may have executed on behalf of any other labor organization.

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(Signature of Employee)

(Address of Employee)

(Print name of Employee)

(City)

(State)

(Zip)

(Date of Signature)

(Unit)

(Work Location)

(Department)

Social Security No.

MISU

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